PTO/SB/06 (08-03) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY **SMALL ENTITY** (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE FFF RATE FEE **BASIC FEE** (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ X S = OR = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = = * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY **SMALL ENTITY** CLAIMS HIGHEST **PRESENT** REMAINING RATE NUMBER ADDI-RATE ADDI-TIONAL ENDMENT TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) X S OR Independent Minus (37 CFR 1.16(b)) X S = OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + s TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA AMENDMENT** AFTER AMENDMENT **PREVIOUSLY** TIONAL TIONAL PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus OR Independent (37 CFR 1.16(b)) Minus = X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NIMBER RATE ADDI-RATE ADDI-**EXTRA** ENDMENT PREVIOUSLY AFTER TIONAL TIONAL FEE AMENDMENT PAID FOR FEE Total Minus = (37 CFR 1.16(c)) X S OR X S = Independent (37 CFR 1.16(b)) Minus X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete,

including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			96				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		. 6		ſ	X\$ 9=		OR	X\$18=	106	
INDEPENDENT CLAIMS			/ minus 3 =		. /		ľ	X40=		OR	X80=	90	
MULTIPLE DEPENDENT CLAIM PRÉSENT						ľ	+135=		OR	+270=	-		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	308		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENOMENT		High NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 26	Minus	. 2	26.	• /		X\$ 9=		OR	X\$18=		
	Independent	· 4	Minus	***	4	• _/	Ī	X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		ı	+135=		OR	+270=		
							L	TOTAL			TOTAL		
ADOIT. FEE OR (Column 1) (Column 3)										ADDIT. FEE	,		
AMENDMENT B	<i>y</i>	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	EST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 24	Minus	2	4	•		X\$ 9=		OR	X\$18=		
	Independent	.1 4	Minus	*** ,	4	-		X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	CNUEN	CAIM		'	+135=		OR	+270=		
a of od								TOTAL DOIT. FEE		OR	TOTAL ADDIT, FEE		
•	1-27-07	-27-04 (Column 1) (Column 2) (Column 3)							4221			4001	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 24,	Minus	6	26	• /		X\$ 9=		OR	X\$18=		
	Independent	. 4	Minus	•••	4	-		X40=		OR	X80=		
L	FIRST, PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
**	If the Techest No	mber Previously P	ald For IN THI	IS SPACE IS SPACE	is less the is less the	n 20, enter "20. in 3. enter "3."		TOTAL DDIT. FEE		OR	ADDIT. FEE		
	The Highest Nun	mer Previously Pa	id For (Total o	r Independ	deni) is the	highest numbe	er four	nd in the ap	propriate bo	a in co	dumn 1.		